

OBN 40 Hour Clan Lab Safety Certification School Application Form

FAX completed application to: 405-524-7619 Attn: Michael Snowden **Questions?** Call: 405-521-2885
 Or Mail to: Oklahoma Bureau of Narcotics, Attn: Michael Snowden
 4545 N. Lincoln Blvd., Suite 11, Oklahoma City, Oklahoma 73105

1	Name:	SSN#:	
2	Phone# :	Pager#:	
3	FAX#:	Email:	
4	Agency or DrugTask Force mailing address:		
5	Job title:		
6	Agency:		
7	County or jurisdiction:		
8	Assigned duties:		
9	Oklahoma peace officer certification date:		
10	Years of law enforcement experience:		
11	Check one: <input type="checkbox"/> Full time narcotics investigator <input type="checkbox"/> Part time narcotics investigator		
12	Is the applicant part of a task force working clandestine labs?		Yes No
13	If yes, name of task force:		
14	How many clan labs has your agency or task force investigated in the past 12 months?		
15	Has the applicant previously attended a clandestine lab certification school?		Yes No
16	Sponsor:	Location:	Date:
17	If the applicant has previously attended a clandestine lab certification school, have they maintained certification? (8-hour annual re-certification class)		
18	The applying agency must possess or have access to required personal protective equipment. This includes total SCBA gear, hooded Tychem SL coverall suits or equivalent, Nitrile gloves or equivalent, and chemical boots or booties. Tanks must be filled. Do you understand?		Yes No
19	Personal Protective Equipment will not be issued. Do you understand?		
20	If the applicant has any questions concerning equipment, call Michael Snowden.		
21	Is a signed Memo of Understanding attached to this application? (Required)		Yes No
22	Additional remarks to the school coordinator:		
23	If applicant is selected how should their name read on the certificate: (PLEASE PRINT BELOW)		

Applicant (print name above)	Applicant signature above	Date
Agency Head (print name above)	Agency Head Signature above	Date